

MONTANA STATE HOSPITAL POLICY AND PROCEDURE

STANDARD PRECAUTIONS

Effective Date: December 18, 2002 Policy #: IC-15

Page 1 of 3

I. PURPOSE: To provide the first line of defense for healthcare workers against the risks of exposure to bloodborne pathogens.

II. POLICY:

- A. Standard Precautions combine the features of universal precautions and body substance isolation. Standard Precautions apply to all patients regardless of their diagnosis or suspected infection status. Standard Precautions apply to the following:
 - 1. Blood;
 - 2. All body fluids, secretions and excretions except sweat whether or not they contain visible blood;
 - 3. Non-intact skin; and
 - 4. Mucous membranes.

III. **DEFINITIONS**: None

IV. RESPONSIBILITIES:

- A. All staff are responsible for understanding the principles of Infection Control and Standard Precautions.
- B. Staff Development Service will provide educational opportunities annually for all staff, related to Standard Precautions.
- C. Infection Control Office will provide educational materials and training in conjunction with Staff Development Service for all staff, visitors, and volunteers as needed.
- D. Hospital administration is responsible for supporting the Infection Control Office, policies and regulations of OSHA, and recommendations of the CDC.

Page 2 of 3

V. PROCEDURE:

- A. When there is evidence of a known infection or disease, specific precautions covered in the *Exposure Control Plan* or the *Guidelines for Isolation Precautions Policy* should be used in addition to Standard Precautions. At a minimum, the following standards of practice are required of all employees when working in patient areas or with equipment which may have been contaminated with infectious material. These precautions do not relieve employees of responsibility for knowing and complying with more detailed policies included in the *Exposure Control Plan* and the *Guidelines for Isolation Precautions Policy* which must be consulted and followed routinely.
- B. Hand Washing: Hands are to be washed after touching blood, body fluids, secretions, excretions, and other contaminated items, whether or not gloves have been worn. Hands must be washed immediately after removal of gloves, between any patient contact and when otherwise indicated. This will help prevent transmission of microorganisms. To prevent cross contamination of different body sites on the same patient, it may be necessary to wash hands between tasks and procedures.
- C. Gloves: Gloves are to be worn when touching blood, body fluids, secretions, excretions, and other contaminated items. Clean, non-sterile gloves will be adequate. Gloves shall be changed between tasks and procedures on the same patient after contact with material that may contain high concentration of microorganisms.
- D. Mask, Eye Protection, Face Shields: When performing procedures that may be likely to generate splashes or sprays of blood, body fluids, secretions or excretions, wear a mask and eye protection, or a face shield. This will protect the mucous membranes of the eyes, nose, and mouth.
- E. Gowns: When performing procedures that may be likely to generate splashes or sprays of blood, body fluids, secretions, or excretions, wear a gown to protect the skin and to prevent soiling of clothing. Always remove the soiled gown as soon as possible and wash hands.
- F. Patient Care Equipment: All patient care equipment soiled with blood, body fluids, secretions, or excretions shall be handled in a manner which will prevent skin and mucous membrane exposures. Single use, disposable items must be disposed of properly. Make sure reusable equipment has been cleaned and reprocessed appropriately prior to use on another patient.
- G. Environmental Controls: Ensure the facility has adequate procedures and they are followed for the routine cleaning of all surfaces including beds, bed rails, bedside equipment, and other frequently touched surfaces.

Montana State Hospital Policy and Procedure

| STANDARD PRECAUTIONS | Page 3 of 3 |
|----------------------|-------------|

- H. Linen: Used linen soiled with blood, body fluids, secretions and excretions will be handled, transported and processed in a manner which prevents skin and mucous membrane exposure, contamination of clothing, and the transfer of microorganisms to the other patients and the environment.
- I. Occupational Health and Bloodborne Pathogens: Avoid injuries if at all possible when using needles, scalpels, and other sharp instruments. Never recap needles. Place all contaminated needles, syringes, scalpel blades and other sharp items in designated puncture resistant containers. These containers should be located as close as possible to the area when the items are used.
- J. Use mouthpieces, resuscitation bags or other ventilation devices when the need for resuscitation is anticipated.
- K. Patient Placement: Ensure patients who may be a source of contamination to other patients or the environment be placed in a private room. Consult with the infection control professional regarding patient placement if a private room is not available.
- VI. REFERENCES: Surveillance Prevention and Control of Infection, Policy and Procedure Manual 1996; Exposure Control Plan Policy #IC-03; Guidelines for Isolation Precautions Policy #IC-11.
- VII. COLLABORATED WITH: Infection Control Coordinating Group Chair, Staff Development Coordinator, and Director of Nursing Services
- **VIII. RESCISSIONS:** Policy # IC-15, *Standard Precautions* dated February 14, 2000; HOPP #IC-02-02, *Universal Precautions* dated February 15, 1995.
- **IX. DISTRIBUTION:** All hospital policy manuals and exposure control plan manuals.
- X. REVIEW AND REISSUE DATE: December 2005
- XI. FOLLOW-UP RESPONSIBILITY: Infection Control Nurse
- XII. ATTACHMENTS: None

| | // | | //_ | |
|------------------------|------|------------------|------|--|
| Ed Amberg | Date | Thomas Gray, MD | Date | |
| Hospital Administrator | | Medical Director | | |